FOR INSTRUCTIONS, SEE BACK OF FORM	FORM
DISCLOSURE SUMMARY PAGE	חפס
COMMITTEE NAME (Must be same as on Statement of Organization)	(Rev. 05/2002) DISCLOSURE REPORT For Office Use Only
IMPORTANT: Indicate type of committee you are reporting for: 2003 JAN 16 PN 12: 5	
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates	Audited Computer
CANDIDATE COMMITTEES ONLY:	
Candidate Name  Political Party  Structuat  Office Sought  District (if Senate or House)	
Shraft (Dubuyuk Corunty)	
SIGNATURE OF TREASURER for person filing this report)  (3)582 9942  TELEPHONE	1/15/2009 DATE SIGNED
Routine Penalties Due For Late Filed Reports Range from	\$20 to \$800
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:	
REPORT FOR ANIA (1) ELECTIO	
(report date) Indicate	one [[]
CHECK IF AMENDMENT TO REPORT DATED Local	Committees, enter Date of Election
Count	1   . 4 · 0   X by & Local Committees, enter County in
	Election is held _
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STATEMENT OF CASH ON HAND	<u> </u>
CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held	1 wh 29
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